1. (currently amended) A method of treating pathogenic polyclonal B cell activation or class switching in a patient, the method comprising:

administering to said patient an effective dose of a CD1 blocking agent antibody or fragment of an antibody, wherein said blocking agent is characterized as interfering antibody binds to CD1, and interferes with T cell recognition of CD1 and is inhibitory of inhibits CD1 signaling;

wherein said dose is effective to treat the symptoms of said polyclonal B cell activation or class switching.

- 2. (original) The method according to Claim 1, wherein said pathologic polyclonal B cell activation or class switching results in systemic lupus erythematosus.
- 3. (withdrawn) The method according to Claim 2, wherein said CD1 blocking agent is a glycolipid or phospholipid.

4-5. (canceled)

- 6. (currently amended) The method according to Claim <u>1</u> 5, wherein said antibody is a monoclonal antibody.
- 7. (original) The method according to Claim 6, wherein said monoclonal antibody is a human or humanized antibody.
- 8. (currently amended) The method according to Claim $\underline{6}$ 7, wherein said monoclonal antibody specifically binds to human CD1d.
 - 9. (canceled)
- 10. (currently amended) The method according to Claim 6 5, wherein said antibody comprises a cocktail of monoclonal antibodies that bind to multiple human CD1 isotypes.
- ৌ. (withdrawn) The method of Claim 4, wherein said polypeptide is soluble CD1 or a glycolipid bound to CD1.

12. (original) The method according to Claim 2, wherein said administration is by intravenous injection.

- 13. (currently amended) A method according to Claim 2, further comprising administering to said patient a second therapeutic agent which is an immunosuppressant, anti-inflammatory, or anti-coagulant agent for the treatment of systemic lupus erythematosus.
- 14. (withdrawn) The method according to Claim 4, wherein said polypeptide is a soluble T cell antigen receptor.